

Atty. Dkt. No. 039386-0588

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Jennifer L. HILLMAN et al.

Title:

PHOSPHATIDYLINOSITOL 4,5-

BISPHOSPHATE 5-PHOSPHATASE

Appl. No.:

09/892,287

Appl. Filing Date:

June 26, 2001

Examiner:

Patrick NOLAN

Art Unit:

1644

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. §141, or the commencement of a civil action under 35 U.S.C. §145 or §146 (unless the appeal or civil action is terminated).

- 1. Submission required under 37 C.F.R. §1.114: (check items that apply)
 - a. Previously submitted:
 - [X] Please enter and consider the amendment/reply previously filed on <u>September</u> 30, 2004.

12/01/2004 GWDRDOF1 00000048 09892287

01 FC:1801 02 FC:1252 790.00 DP 430.00 DP

The filing fee is calculated below:

	Claims as Amended		Previously Paid For	Extr Pres	a Claims ent		Rate		Fee Totals
RCE Fee 1.17(e):							\$790.00	=	\$790.00
Total Claims:	17	-	20	= 0		x	\$18.00	=	\$0.00
Independents	3	-	3	= 0		x	\$88.00	=	\$0.00
First p	resentation o	f an	y Multiple I	ependen	t Claims:	+	\$300.00	=	\$0.00
					CLAIMS	FEE	TOTAL:	=	\$790.00

[X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

[X] Extension for response filed within the second month: \$430.00	\$430.00
EXTENSION FEE TOTAL	\$430.00
CLAIMS AND EXTENSION FEE TOTAL:	\$1220.00
TOTAL FEE:	\$1220.00

^[] Please charge Deposit Account No. 19-0741 in the amount of \$0.00. A duplicate copy of this transmittal is enclosed.

[[]X] A check in the amount of \$1220.00 to cover the filing fee is enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Date November 30, 2004

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Respectfully, submitted,

The stall by

Patent Agent for Applicant Registration No.55,600